

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	JL	75021	
O.I.P.E. CLASSIFIER		713	
FORMALITY REVIEW	CH	10909114	8/31/04
RESPONSE FORMALITY REVIEW			10/22/00

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 — (Through numeral)... Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1	✓	✓	5/16/05
2	✓	✓	
3	✓	✗	
4	✓	✓	
5	✓	✓	
6	✓	✓	
7	✓	0	
8	✓	0	
9	/	✓	
10	✓	✓	
11	✓	✓	
12	✓	✓	
13	✓	✓	
14	✓	✓	
15	✓	✓	
16	✓	✓	
17	✓	✓	
18	✓	✓	
19	✓	✓	
20	✓	0	
21	✓	0	
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If more than 150 claims or 10 actions  
staple additional sheet here

Best Available Copy